

BUSINESS INCOME/EXPENSES

TOTAL BUSINESS INCOME		MILEAGE INFORMATION		
EXPENSES:		TOTAL MILES		
ACCOUNTING FEES	\$	BUSINESS MILES		
ADVERTISING	\$			
AUTO MAINTENANCE	\$	EQUIPMENT PURCHASES (PLEASE LIST)		
		ITEM	COST	Placed in Service
AUTO REPAIR	\$			
BANK FEES	\$			
CELLPHONE	\$			
CONTRACT LABOR (1099S)	\$			
CREDIT CARD MACHINE FEES	\$			
FUEL	\$			
INSURANCE- HEALTH	\$			
INSURANCE- LIABILITY	\$			
INTEREST - Mortgage	\$			
INTEREST- Other	\$			
INVENTORY	\$			
LEGAL/PROFESSIONAL	\$			
MEALS/ENTERTAINMENT	\$	HOME OFFICE DEDUCTION		
OFFICE EXPENSE	\$			
PARKING AND TOLLS	\$			
PERMITS AND FEES	\$			
REGISTRATION	\$	Sq Ft of home		
RENT-OFFICE	\$	Sq ft of Office		
RENT-VEHICLE/EQUIPMENT	\$	Mortgage Interest		
REPAIR/MAINTENANCE	\$	Rent		
SOFTWARE	\$	Taxes		
SUPPLIES	\$	Insurance		
TAXES/LICENSES	\$	PMI		
TOOLS	\$	Utilities		
TRAINING	\$	Internet		
TRAVEL	\$	Association Dues		
UNIFORMS	\$	Waste Removal		
UTILITES	\$	Security system		
WAGES	\$			
WASTE	\$			
Other Expenses (Detail below)				
	\$			
	\$			
	\$			
	\$			
	\$			
	\$			

The figures/amounts above were submitted/furnished by me (us) to the tax preparer. I (we) have reviewed the information and to the best of my (our) knowledge and belief, it is accurate, true, correct, and complete. The tax preparer has made me aware that the IRS may require me to provide proof for all the items listed above and other items on my tax return and, if needed, I will be able to provide proof of this information to the IRS .

Taxpayer Signature: _____ Date: _____

Spouse Signature: _____ Date: _____